

APPROVAL  
AND  
FILED

PLEASE READ ALL INSTRUCTIONS BEFORE COMPLETING THIS FORM.

05 JUL 15 AM 11:39

SECRETARY OF STATE  
TALLAHASSEE, FLORIDA

**CORPORATION  
REINSTATEMENT**



FLORIDA DEPARTMENT OF STATE  
Secretary of State  
DIVISION OF CORPORATIONS

DOCUMENT # G71357

1. Corporation Name NA DEVELOPMENT CORPORATION.

2. Principal Office Address

601 12th Street West  
Suite, Apt. #, etc.

City & State

Bradenton, Florida

Zip

34205

Country

USA

3. Mailing Office Address

601 12th Street west  
Suite, Apt. #, etc.

City & State

Bradenton, Florida

Zip

34205

Country

USA

**REINSTATEMENT**

88-05

4. Date Incorporated or Qualified  
To Do Business in Florida

11/23/1983

5. FEI Number

592349674

Applied For

Not Applicable

6. CERTIFICATE OF STATUS DESIRED ☐

\$8.75 Additional Fee required  
for a Certificate of Status

7. Name and Address of Current Registered Agent

Name

Philip E. Perrey, Esq.

Street Address (P.O. Box Number is Not Acceptable)

601 12th Street West

Suite, Apt. #, Etc.

City

Bradenton

State

FL

Zip Code

34205

8. I, being appointed the registered agent of the above named corporation, am familiar with and accept the obligations of section 607.0505 or 617.0503, F.S.

Signature of  
Registered Agent

*Philip E. Perrey*

REGISTERED AGENT MUST SIGN

Date

7/13/2005

9. Names and Street Addresses of Each Officer and/or Director (Florida nonprofit corporations must list at least 3 directors)

Titles	Name of Officers and/or Directors	Street Address of Each Officer and/or Director	City / State / Zip
PD	Gordon W. Leech	601 12th Street West	Bradenton, FL 34205
VTD	John V. Gibas	601 12th Street West	Bradenton, FL 34205
S	Sheila C. Smith	601 12th Street West	Bradenton, FL 34205
D	Gerald L. Conner, Jr.	601 12th Street West	Bradenton, FL 34205
D	Dennis A. McDermott	601 12th Street West	Bradenton, FL 34205

10. I certify that I am an officer or director or the receiver or trustee empowered to execute this application as provided for in chapter 607 or 617, F.S. I further certify that when filing this reinstatement application, the reason for dissolution has been eliminated, the corporate name satisfies the requirements of section 607.0401 or 617.0401, F.S., that all fees owed by the corporation have been paid and the names of individuals listed on this form do not qualify for an exemption under section 119.07(3)(i), F.S. The information indicated on this application is true and accurate, and my signature shall have the same legal effect as if made under oath.

SIGNATURE:

*Gordon W. Leech*  
SIGNATURE AND TYPED OR PRINTED NAME OF SIGNING OFFICER OR DIRECTOR  
GORDON W. LEECH

7/13/2005

Date

941-747-1871

Daytime Phone #

CR2E081 (01/05)